

In the Court of Appeals of the State of Alaska

Teresa Johnson,

Appellant,

v.

State of Alaska,

Appellee.

Court of Appeals No. **A-12744**

**Notice of Intent
to Enter Judgment For Cost of
Appointed Attorney
Appellate Rule 209(b)**

Date of Notice: **10/23/19**

Trial Court Case No. **3PA-16-01291CR**

Unless you or the prosecutor objects by **12/9/19** (you may use the enclosed form to file an objection), the court or clerk will enter a judgment against you for the cost of your appointed attorney as indicated below:

Type of Appellate Proceeding	Misdemeanor	Felony
Sentence Appeal or Petition for Sentence Review	\$ 250	\$ 500
Merit Appeal or Appeal from Post-Conviction Relief Proceedings	750	1,500
Combined Merit and Sentence Appeal or Petition for Sentence Review	1,000	2,000
Other Appellate Actions (Petition for Review, Petition for Hearing, Original Application)	500	1,000

Beth A. Pechota, Deputy Clerk

Mailed to Appellant at: 941 Snohomish Dr., #2
Wasilla AK 99654

Distribution:

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In the Court of Appeals of the State of Alaska

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Opposition to Entry of Judgment For Cost of Appointed Attorney

Date of Notice: **10/22/2019**

Trial Court Case No. 3PA-16-01291CR

I oppose the entry of the proposed judgment against me for the cost of appointed attorney for the following reason(s):

- ☐ My conviction was reversed on appeal.
- ☐ I filed the following type of action, but the clerk or court assessed the wrong amount for this action:

☐ Petition for Hearing

☐ Petition for Review

☐ Petition for Sentence Review

☐ Original Application

☐ Sentence Appeal

☐ Combined Merit/Sentence Appeal

☐ Merit Appeal

☐ Post-Conviction Relief Appeal

- ☐ The clerk or court is proposing to enter more than one judgment against me. This is not correct because all of my offenses were resolved in one court proceeding.

- ☐ I should be assessed less than the scheduled amount because my attorney spent only ____ hours on my case. (If you check this box, you must attach a statement from your attorney showing the hours spent on your case.)

- ☐ Other _____

Appellant/Petitioner's Daytime Phone

Appellant/Petitioner's Signature

Appellant/Petitioner's Mailing Address

City

State

Zip

Mailed to State's Attorney on: _____ (Date)